# Meridian Diagnostics, Inc. Cincinnati, OH 45244

# 510(k) Notification **Premier Cryptosporidium**

#### 510(k) Summary A. **Identification Information**

**Submitter's Information:** 

Submitter's Name and Address:

Meridian Diagnostics, Inc. River Hills Drive Cincinnati, OH 45244

Phone Number: 1-800-543-1980

Contact Person: Allen D. Nickol, PhD

Director of Clinical and Regulatory Affairs

**Date Summary Prepared:** August 5, 1998

Name of Device: Premier Cryptosporidium.

**Classification Name:** 

Cryptosporidium spp. (MHJ)

## **Predicate Equivalent Device:**

ProSpecT Cryptosporidium Microplate Assay

## **Description of Device:**

The assay is a conventional microwell sandwich enzyme immunoassay, utilizing polyclonal capture and monoclonal detection antibodies.

#### **Intended Use:**

The Premier Cryptosporidium enzyme immunoassay (EIA) is an in vitro qualitative procedure for the detection of Cryptosporidium antigens in stool. Test results are intended to aid in the diagnosis of Cryptosporidium infection.

## **Comparison with Predicate Device:**

The following comparison of the use, technology, function and performance supports the Statement of Equivalence between the Premier Cryptosporidium test and the ProSpect Cryptosporidium Microplate Assay. The differences do not

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# 510(k) Notification Premier Cryptosporidium

raise additional concerns regarding safety and effectiveness. Safety and effectiveness are demonstrated to be substantially equivalent.

Method	Premier Cryptosporidium	Alexon ProspecT Cryptosporidium		
Intended Use	Detection of Cryptosporidium antigens	Detection of Cryptosporidium Antigen		
	in patient stool	in aqueous extracts of fecal specimens		
Results	Qualitative	Qualitative		
Specimen Required	Preserved (Formalin, SAF) and	Preserved (Formalin, SAF, MF)		
	Unpreserved Stools	Unpreserved Stool, and stools in C&S (or equivalent) transport media		
Technology	Sandwich Enzyme Immunoassay	Sandwich Enzyme Immunoassay Polyclonal capture, monoclonal		
	Polyclonal capture, monoclonal detect,			
	polyclonal conjugate, TMB substrate	conjugate, TMB substrate		
Level of Skill Required	Laboratory Technician	Laboratory Technician		
Function	Specimen diluted 1/4 and 200µl added to	10. Sample preparation varies with		
	well containing rabbit anti-	specimen type. Some are diluted 1/4,		
	Cryptosporidium capture Ab.	others are not diluted. Add 0.2ml to wells.  11. Incubate 1 hr at room temperature.  12. Wash 3 times.		
	Incubate 1 hr at room temperature.			
	Wash 5 times.			
	Add 2 drops detection Ab and two drops			
	enzyme conjugate per well.	13. Add 4 drops Enzyme Conjugate.		
	Incubate 30 minutes at room	14. Incubate 30 minutes at room		
	temperature.	temperature 15. Wash 5 times.		
	Wash 5 times.			
	Add 4 drops substrate.	16. Add 4 drops Substrate		
	Incubate 10 minutes at room	17. Incubate 10 minutes at room		
	temperature.	temperature.		
	Add two drops stop solution and read	18. Add 1 drop Stop Solution and rea		
	visually or spectrophotometrically	visually or spectrophotometrically		
Interpretation	Pos/Neg read visually or	Pos/Neg read visually or		
- F	spectrophotometrically. Fixed cutoff	spectrophotometrically. Color chart for		
	0.140 single wavelength (450nm) or	visual; single wavelength read pos if		
	0.100 dual wavelength (450-630nm)	≥0.05 absorbance units above negative		
		control		
Performance vs.				
Reference Methods				
Sensitivity	100%	100% 97%		
Specificity	99%	98%		

Interfering Substances: None observed.

#### **DEPARTMENT OF HEALTH & HUMAN SERVICES**



DEC - 3 1998

Food and Drug Administration 2098 Gaither Road Rockville MD 20850

Public Health Service

Allen D. Nickol, Ph.D. Director of Clinical and Regulatory Affairs Meridian Diagnostics, Inc. 3471 River Hills Drive Cincinnati, Ohio 45244

Re: K

K982764

Trade Name: Premier Cryptosporidium

Regulatory Class: II Product Code: MHJ Dated: October 21, 1998 Received: October 22, 1998

### Dear Dr. Nickol:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

Under the Clinical Laboratory Improvement Amendments of 1988 (CLIA-88), this device may require a CLIA complexity categorization. To determine if it does, you should contact the Centers for Disease Control and Prevention (CDC) at (770)488-7655.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for <u>in vitro</u> diagnostic devices), please contact the Office of Compliance at (301) 594-4588. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll free number (800) 638-2041 or at (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsmamain.html"

Sincerely yours,

Steven I. Gutman, M.D., M.B.A.

Director

Division of Clinical Laboratory Devices

Steven Butman

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

Meridian Diagnostics, Inc. Cincinnati, OH 45244

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Е.	Indications	for	Use	Statement
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510(k) Number (if known): <u>K 98 2764</u>

Device Name: Premier Cryptosporidium

Indications For Use:

The Premier Cryptosporidium enzyme immunoassay (EIA) is an in vitro qualitative procedure for the detection of Cryptosporidium antigens in stool. Test results are intended to aid in the diagnosis of Cryptosporidium infection.

#### PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED

Concurrence of CDRH, Office of Device Evaluation (ODE)

(Division Sign-Off)
Division of Clinical Laboratory Devices

510(k) Number.

Prescription Use \_\_\_\_\_\_ (Per 21 CFR 801.109)

OR

Over-The-Counter Use (Optional Format 1-2-96)